HEALTH SERVICES AND DEVELOPMENT AGENCY SPEAKER'S FORM

COMPLETE THIS FORM IF YOU WANT TO SPEAK AT TODAY'S MEETING OR HAVE YOUR ATTENDANCE ON FILE WITH THE AGENCY. PLEASE PRINT LEGIBLY MEETING DATE: June 24, 2020 NAME: Michael D. Brent TITLE: Attorney COMPANY / AGENCY: Bradley Arant Boult Cummings LLP ADDRESS: 1600 Division Street, Suite 700 CITY / STATE: Nashville, TN ZIP CODE: 37203 PHONE NO.: (615) 252 _ 2361 . SIGNATURE: FORM MUST BE SIGNED" 1. PROJECT #: CN 2004-010 PROJECT NAME: Open Arms Care Corporation dba Knox County #7 Powell (Knox County) 2. CHECK THE ONE THAT APPLIES: ☑ I WISH TO SPEAK IN SUPPORT OF THE PROJECT ☐ I WISH TO SPEAK IN OPPOSITION OF THE PROJECT 3. DO YOU WISH TO BE COPIED ON THE APPROVAL / DENIAL LETTER FOR THIS PROJECT? **⋈** YES П NO PURSUANT TO T.C.A. □ 68-11-1609(f), OPPOSITION TO THIS PROJECT WILL SERVE AS NOTICE OF A PRIOR OBJECTION FILED DIRECTLY WITH THE AGENCY. HEALTH SERVICES AND DEVELOPMENT AGENCY SPEAKER'S FORM COMPLETE THIS FORM IF YOU WANT TO SPEAK AT TODAY'S MEETING OR HAVE YOUR ATTENDANCE ON FILE WITH THE AGENCY. June 24, 2020 PLEASE PRINT LEGIBLY MEETING DATE: NAME: George Stevens TITLE: CEO COMPANY / AGENCY: Integra Resources ADDRESS: 101 West Park Drive, Suite 140 37027 CITY / STATE: Brentwood, TN ZIP CODE: PHONE NO.: (615) 585 - 3496 . SIGNATURE: "FORM MUST BE SIGNED" 1. PROJECT #: CN 2004-010 PROJECT NAME: Open Arms Care Corporation dba Knox County #7 Powell (Knox County) 2. CHECK THE ONE THAT APPLIES: X I WISH TO SPEAK IN SUPPORT OF THE PROJECT I WISH TO SPEAK IN **OPPOSITION** OF THE PROJECT

PURSUANT TO T.C.A. \Box 68-11-1609(f), OPPOSITION TO THIS PROJECT WILL SERVE AS *NOTICE* OF A PRIOR OBJECTION FILED DIRECTLY WITH THE AGENCY.

TX YES

3. DO YOU WISH TO BE COPIED ON THE APPROVAL / DENIAL LETTER FOR THIS PROJECT?

HEALTH SERVICES AND DEVELOPMENT AGENCY SPEAKER'S FORM

COMPLETE THIS FORM IF YOU WANT TO SPEAK AT TODAY'S MEETING OR HAVE YOUR ATTENDANCE ON FILE WITH THE AGENCY. PLEASE PRINT LEGIBLY MEETING DATE: NAME: Richard Brown June 24, 2020 TITLE: Director COMPANY / AGENCY: Facilities Development Group ADDRESS: __101 West Park Drive, Suite 140 CITY / STATE: ___ Brentwood, TN ZIP CODE: 37027 PHONE NO.: <u>(615)</u> 620 - 6272 ... SIGNATURE: 1. PROJECT #: CN_2004-010 PROJECT NAME: Open Arms Care Corporation dba Knox County #7 2. CHECK THE ONE THAT APPLIES: Powell (Knox County) I WISH TO SPEAK IN SUPPORT OF THE PROJECT I WISH TO SPEAK IN OPPOSITION OF THE PROJECT 3. DO YOU WISH TO BE COPIED ON THE APPROVAL / DENIAL LETTER FOR THIS PROJECT? X YES I NO

PURSUANT TO T.C.A. \square 68-11-1609(f), OPPOSITION TO THIS PROJECT WILL SERVE AS *NOTICE* OF A PRIOR OBJECTION FILED DIRECTLY WITH THE AGENCY.